

Community Development 521 E. Fourth Street Long Beach, CA 90802 Tel 562 570-6985 Fax 562 499-1052

#### INSPECTION FORM: SECTION 8 EXISTING HOUSING PROGRAM

					Caseworker:
					<del></del>
UNIT INFOR	<u>RMATION</u>				Housing Type
					Condo
Address of Insp	ected Unit			Type of Inspection	Congregate
				Annual	Duplex/Semi-detached
				Initial	Highrise (5 plus stories)
				Special	Lowrise (2,3,4 stories)
				Other	Mobil Home
					Single Family House
					Townhouse
TENANT INI	FORMATION			OWNER INFORMATION	
TEMANT IN	ORIMATION			OWNER IN ORDINA	
Name of Tenant	::			Owner/Agent Name:	
Current Street A	ddress:			Address:	
Current Telepho	one #:			Telephone #:	
Current relepho	ліс <del>и</del> .			receptione #.	
INSPECTION	N STATUS			Cert/Voucher B	R
				Unit Size Per RLA: B	R
INSP. DATE	INSPECTOR	PASS FAIL	INCL. RESP.	Unit Size Per Insp: B	R
			ТО	Garage Available: Yes / N	No
			ТО	Included in Rent: Yes / N	10
			ТО	Cost of Garage:	
			TO		Rent Approval:
				Requested Rent: \$	
	<u>FORMATION</u>			Max Allowed: \$	
(T=Tenant O=C	wner)			Tenant Move In Date:	
	T. / O.	C	P1 ( :	IMPODEANE OWNED AND	
Cooking	T/O	Gas	Electric	IMPORTANT OWNER AND  • The owner must correct all failed items.	TENANT NOTICE
Lighting				• The re-inspection for failed items will autor	natically be scheduled within
Heating				the next 20-25 days. If the unit does not pass	
Refrigerator				entry to the unit for any reason, payment to the Additional re-inspections must be requested	
Range/Stove				HQS compliant. Payment cannot be rendered	
Trash Coll.				compliance 30 days after the initial failed ins	pection per federal regulation.
Water/Sewer				Note: The owner may hold the tenant respon	sible for damages caused by the
Hot Water				tenant, according to CA Landlord-Tenant Lav	
		1			
ADDITIONA	L INSPECTIO	ON COMMENT	'S:		
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					_
Signature of O	wner/Agent		Date	Signature of Tenant/Representative	Date
	Signature of Owner/Agent Date			- G	~ ****

1.1 **Living Room Present COMMENTS:** 1.2 **Electricity** 1.3 **Electrical Hazards** 1.4 Security Window Condition 1.5 **Ceiling Condition** 1.6 1.7 **Wall Condition** 1.8 **Floor Condition** 1.9 **Lead Paint** Other/Smoke Detector 2.0 KITCHEN AREA PASS FAIL Kitchen Area Present 2.1 **COMMENTS: Electricity** 2.2 2.3 **Electrical Hazards** 2.4 Security 2.5 **Window Condition Ceiling Condition** 2.6 2.7 **Wall Condition** 2.8 **Floor Condition** 2.9 **Lead Paint** 2.1 Stove/Range 2.1 Refrigerator 2.12 Sink 2.13 Food Storage **Counter Tops** (MASTER OR UPSTAIRS) 3.0 BATHROOMS **PASS** FAIL (DOWNSTAIRS) #1 **PASS** FAIL Bathroom(s) Present 3.1 **COMMENTS: COMMENTS:** 3.2 **Electricity Electrical Hazard** 3.3 3.4 Security **Window Condition** 3.5 **Ceiling Condition** 3.6 3.7 **Wall Condition Floor Condition** 3.8 3.9 **Lead Paint** 3.10 Flush Toilet/Privacy 3.1 Wash Basin Tub/Shower 3.1 3.1 Ventilation 4.0 OTHER ROOMS (SIp, etc.) **PASS** FAIL 4.1 Room **COMMENTS:** 4.2 **Electrical** 4.3 **Electrical Hazards** 4.4 Security 4.5 **Window Condition** 4.6 **Ceiling Condition** 4.7 **Wall Condition** 4.8 **Floor Condition** 4.9 **Lead Point** 4.10 Closets

1.0 LIVING ROOM

4.11

**Smoke Detector** 

**PASS** 

FAIL

	4.0 OTHER ROOMS (SIp, etc.)			
	(	PASS	FAIL	
4.1	Room			COMMENTS:
4.2	Electrical			
4.3	Electrical Hazards			
4.4	Security			
4.5	Window Condition			
4.6	Ceiling Condition			
4.7	Wall Condition			
4.8	Floor Condition			
4.9	Lead Paint			
4.10	Closets			
4.11	Smoke Detector			
	4.0 OTHER ROOMS (SIp, etc.)			
		PASS	FAIL	
4.1	Room			COMMENTS:
4.2	Electrical			
4.3	Electrical Hazards			
4.4	Security			
4.5	Window Condition			
4.6	Ceiling Condition			
4.7	Wall Condition			
4.8	Floor Condition			
		1		

# 4.0 OTHER ROOMS (SIp, etc.)

4.9

4.11

**Lead Paint** 

**Smoke Detector** 

4.10 Closets

#### PASS FAIL

4.1	Room	COMMENTS:
4.2	Electrical	
4.3	Electrical Hazards	
4.4	Security	
4.5	Window Condition	
4.6	Ceiling Condition	
4.7	Wall Condition	
4.8	Floor Condition	
4.9	Lead Paint	
4.10	Closets	
4.11	Smoke Detector	

### 5.0 SECONDARY ROOMS

## PASS FAIL

5.1	Secondary Rooms	COMMENTS:	
5.2	Security		
5.3	Electrical Hazards		
5.4	Other Hazards		

Other

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ADDITIONAL INSPECTION COMMENTS:					

#### 6.0 BUILDING EXTERIOR

## PASS FAIL

6.1	Foundation			COMMENTS:
6.2	Stairs/Rails/porches			
6.3	Roof/Gutters			
6.4	Exterior Surfaces			
6.5	Chimney/Heat Vents			
6.6	Lead Paint			
6.7	Mobile Home: Tiedown			
6.8	Smoke Detector			
6.9	Electrical Hazards**			
6.10	Gas Hazards **			
	7.0 HEATING/PLUMBING	PASS	FAIL	
7.1	Heating Adequacy			COMMENTS:
7.2	Heating Safety			
7.3	Vent/Cooling Adequacy			
7.4	Hot Water Heater			
	T/P Valve/Discharge			
7.5	Water Supply			
7.6	Plumbing			
7.7	Sewer Connection			
	8.0 GNL HEALTH/SAFETY	PASS	FAIL	
8.1	Access to Unit			COMMENTS:
8.2	Exits			
8.3	Evidence of Infest			
8.4	Garbage/Debris			
8.5	Refuse Disposal			
8.6	Interior Stairs			
8.7	Other Hazards			
8.8	Elevators			
8.9	Interior Air Quality			
8.10	Site/Neighborhood			
8.11	Lead Paint			
	Owner Certification			
	9.0GARAGE/PARKING AREA			
		PASS	FAIL	
9.1	Electrical			COMMENTS:
9.2	Electrical Hazards			
9.3	Security			
9.4	Window Condition			
9.5	Wall Condition			
9.6	Floor Condition			
9.7	Lead Paint			
9.8	Exterior Surfaces			
9.9	Other/Misc.			
ADDITIONAL COMMENTS:				